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**PATENT**

Attorney Docket No. **FORS-04586**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of: *Lyamichev et al.*

Serial No.: 09/882,945

Group No.: 1634

Filed: 06/15/01

Examiner: Myers

Entitled: **NUCLEIC ACID ACCESSIBLE  
HYBRIDIZATION SITES**


**RESPONSE TO OFFICE ACTION MAILED APRIL 9, 2004**

Mail Stop  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8(a)(1)(i)(A)**

I hereby certify that this correspondence (along with any referred to as being attached or enclosed) is, on the date shown below, being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop , Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: 5-21-04 By: \_\_\_\_\_

  
Mary Ellen Waite

Sir or Madam:

This communication is responsive to the Office Action mailed April 9, 2004. The Applicants respectfully request reconsideration of the application in view of the following amendments and remarks.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Victor Lyamichev *et al.*  
Serial No.: 09/882,945 Group No: 1634  
Filed: 06/15/01 Examiner: Meyers  
Entitled: Nucleic Acid Accessible Hybridization Sites

AMENDMENT TRANSMITTAL

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

<p align="center"><b>CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8(a)(1)(i)(A)</b></p> <p>I hereby certify that this correspondence (along with any referred to as being attached or enclosed) is, on the date shown below, being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p> <p>Dated: <u>May 21, 2004</u></p> <p>By: <u>Mary Ellen Waite</u> Mary Ellen Waite</p>
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Sir or Madam:

Transmitted herewith is an amendment for this application. The fee has been calculated as shown below.

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE
Total Claims	40	—	51	0	×	18.00	\$0.00
Independent Claims	3	—	7	0	×	86.00	\$0.00

**TOTAL DUE** **\$0.00**

1. No additional fee is required.
2. Please charge any additional fees, including any fees necessary for extensions of time, or credit overpayment to Deposit Account No. 08-1290. An originally executed duplicate of this transmittal is enclosed for this purpose.

Dated: May 21, 2004

By: Tanya A. Arenson  
Tanya A. Arenson  
Registration No. 47,391

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